



IN REPLY REFER TO:

## United States Department of the Interior

National Park Service  
Vicksburg National Military Park  
3201 Clay Street  
Vicksburg, Mississippi 39183



### Indemnity Agreement

I, the undersigned, in consideration for participating in the Camp of Instruction: Civilian to Soldier overnight camp program indicated below, hereby indemnify and save harmless the United States of America, the U.S. Department of the Interior, the National Park Service, Vicksburg National Military Park, and any and all employees of those entities acting in their official capacities, against any liability, claims, demands, damages, or costs, for my death, bodily injury, or property damage occurring during or as a result of said camp program, which includes erecting and camping in period tents on the historic Vicksburg Battlefield, participating in educational hands-on activities, learning to march in military formation, or other conditions relating to this period Civil War camp of instruction experience. I understand in addition to the inherent risks while camping, the park contains natural resources and hazards which may not be readily perceptible (i.e. wild, free-roaming animals, some of which may bite or sting, such as ticks, bees, wasps, fire ants, etc.; toxic plants like poison ivy) and the geographic location of the park is occasionally subject to adverse weather conditions.

\_\_\_\_\_  
Signature of participant

\_\_\_\_\_  
Signature of parent/guardian responsible for  
minor or dependent

\_\_\_\_\_  
Print name legibly

\_\_\_\_\_  
Print name legibly

\_\_\_\_\_  
Date

If there are any medical conditions you feel park managers should be aware of or that you believe may limit your participation in any of the scheduled activities, please cite them below:

\_\_\_\_\_  
In case of emergency notify:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone

Camp of Instruction Program:

\_\_\_\_\_  
Authorizing Official

\_\_\_\_\_  
Date

